	SECTION: 109.10 Health and Safety Policies	SUBJECT: Emergency Plans
Child Care Center Licensing	☑ New □ Revised	Date: 4/1/98
Provider Handbook Regulations	Rule Citation: 441 IAC 109.10(15)	

RULE

The child care center shall establish definite health policies, including the criteria for excluding a sick child from the center. The policies shall be consistent with the recommendations of the National Health and Safety Performance Standards and shall include, but are not limited to:

Emergency plans.

- a. The center shall have written emergency plans for responding to fire, tomado, flood (if area is susceptible to flood), intruders within the center, intoxicated parents and lost or abducted children. In addition, the center shall have guidelines for responding or evacuating in case of blizzards, power failures, bomb threats, chemical spills, earthquakes, or other disasters that could create structural damage to the center or pose health hazards.
 - If the center is located within a ten-mile radius of a nuclear power plant or research facility, the center shall also have plans for nuclear evacuations. Emergency plans shall include written procedures including plans for transporting children and notifying parents, emergency telephone numbers, diagrams, and specific considerations for immobile children.
- b. Emergency instructions, telephone numbers, and diagrams for fire, tornado, and flood (if area is susceptible to floods) shall be visibly posted by all program and outdoor exits. Emergency plan procedures shall be practiced and documented at least once a month for fire and for tornado. Records on the practice of fire and tornado drills shall be maintained for the current and previous year.
- c. The center shall develop procedures for annual staff training on these emergency plans and shall include information on responding to fire, tornadoes, intruders, intoxicated parents and lost or abducted children in the orientation provided to new employees.
- The center shall conduct a daily check to ensure that all exits are unobstructed.

RATIONALE AND RECOMMENDATIONS FOR IMPLEMENTATION

In Iowa, communities are frequently vulnerable to structural or natural disasters such as fire, tomadoes, floods and flash flooding. Centers are also increasingly responding to "social" emergencies such as intruders into a center, intoxicated parents, lost or abducted children.

Therefore, it is important to have written procedures that are updated annually and to give all staff an annual orientation to the procedures. At a minimum, the procedures should include emergency phone numbers, diagrams for evacuation and protection, notifying parents, and transporting children to safety or medical care.

Centers are vulnerable to other emergency situations that may occur in their communities, including blizzards, chemical spills and bomb threats. While these may seem more remote, center staff need to be aware of the possibility of these natural and man-made disasters and be prepared to respond.

The guidelines do not have to be detailed written plans developed by the center. They can be guidelines prescribed by disaster-preparedness organizations, such as the American Red Cross or the Federal Emergency Management Agency.

You are encouraged to translate these guidelines into written center policies and to discuss with staff specific evacuation procedures for these emergencies. In the case of bomb threats and chemical spills, these may entail removing children a greater distance from the center.

Each county in Iowa has an emergency management coordinator. The coordinator can help plan appropriate polices for health and safety needs, given the hazards that may be specific to your location. Communication also allows the coordinator the opportunity to know where the children will be located during an emergency.

Because of the need for immediate response to any emergency involving nuclear plants, if your center is within a 10-mile proximity to a nuclear power plant or research facility, contact your emergency management coordinator regarding specific responses you should take.

For additional information on hazards and policies relevant to your area, contact your local county Emergency Management Agency (in your local phone book) or contact the Iowa Emergency Management Division in Des Moines at (515) 281-3231 for the contact person in your area.

Emergency plans need to include:

- How children will be transported to safety, to medical care if needed, and eventually home.
- How to contact parents.
- Maintaining a "head count" of the children and staff.
- Procedures should the group become separated.
- Strategies for ensuring the safety of immobile or nonambulatory children, including infants and children with disabilities.
- Items that should be taken if evacuation of the center is necessary (such as emergency contact information, first aid kit, cellular phone).

For centers serving a high number of infants, "baby packs" allow multiple infants to be evacuated by one adult by placing them in a pouch-like carrier strapped to the adult. You may also want to consider the purchase of evacuation cribs for the same purpose.

Doorknob coverings that make the door inoperable, such as those used for safety reasons on storage closets, should never be used on exit doors.

Strategies for dealing with intoxicated or substance-impaired adults are challenging. You are encouraged to consult your own legal counsel in developing your policies. While decisions have to be made on a case-by-case basis, a first step-approach is to offer to telephone someone else to provide transportation for the child (and the parent, if willing).

Staff should <u>not</u> attempt to physically restrict the parent from removing the child. If the parent appears so impaired as to place the child in jeopardy, you could contact local law enforcement. In addition, if the parent does leave with the child, and staff have reason to believe that the parent was substance-impaired, staff must act in their role as mandatory reporters and file a child abuse report.

In addition to the required procedures, you may also want to develop policies for other "social" emergencies or situations, including responding to weapons or drugs brought into the center by children, the notification by law enforcement of a known sexual predator residing in the area, etc.

You may also want to have procedures developed and shared with parents regarding what steps will be taken if a parent fails to arrive within a designated number of minutes after the center closes. The possibility of this occurrence reinforces the need for centers to have accurate and up-to-date phone numbers for phone, office, etc., as well as another adult who can be contacted in lieu of the parent.